



**Wyoming Secretary of State**  
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For Office Use Only

## Foreign Nonprofit Corporation Application for Certificate of Withdrawal

Pursuant to W.S. 17-19-1520 the undersigned corporation hereby applies for a Certificate of Withdrawal from the state of Wyoming.

1. Corporation name:
  
2. Incorporated under the laws of:  
*(State or country)*
  
3. It is no longer transacting business in the state of Wyoming; and it hereby surrenders its authority to transact business in the state of Wyoming.
  
4. It revokes the authority of its registered agent to accept service on its behalf and appoints the Wyoming Secretary of State as its agent for service of process in any proceeding based on a cause of action arising during the time it was authorized to transact business in this state.
  
5. Mailing address to which the Secretary of State may mail a copy of any process served on him under Item 4:
  
6. It will notify the Secretary of State in the future of any change in its mailing address.

**Signature:** \_\_\_\_\_  
*(May be executed by Chairman of Board, President or another of its officers.)*

**Date:** \_\_\_\_\_  
*(mm/dd/yyyy)*

Print Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_ Daytime Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_  
*(An email address is required. Email(s) provided will receive important reminders, notices and filing evidence.)*

**Checklist**

**Filing Fee: \$25.00** Make check or money order payable to Wyoming Secretary of State.  
**Processing time is up to 15 business days** following the date of receipt in our office.  
 The business entity is **active and in good standing** with this office.  
 Please mail with payment to the address at the top of this form. **This form cannot be accepted via email.**  
 Please review the form prior to submission. **The Secretary of State's Office is unable to process incomplete forms.**